



**FLATHEAD COUNTY
FLOODPLAIN DEVELOPMENT
APPLICATION FOR A VARIANCE**

*Submit this application, all required information, and appropriate fee (see current fee schedule)
to the Planning & Zoning office at the address listed above.*

FEE ATTACHED \$ _____

APPLICANT: *(Please print or type)*

NAME: _____

ADDRESS: _____ Phone: _____

CITY/STATE/ZIP: _____

INTEREST IN PROPERTY: _____

OWNER: (If different from above)

NAME: _____

ADDRESS: _____ Phone: _____

CITY/STATE/ZIP: _____

LOCATION OF PROPERTY FOR WHICH VARIANCE IS SOUGHT:

Street Address _____

Legal Description: (Subdivision, Lot and Block Number, or Tract Number; and Section,
Township and Range) _____

DATE PROPERTY ACQUIRED: _____

I/We are requesting a variance from the Flathead County Floodplain and Floodway
Management Regulations as described in Section 4.04 of the stated regulations. Below is a
summary of the project and findings as to the need and appropriateness of the variance.

REASON FOR VARIANCE: _____

SECTION OF REGULATIONS VARIANCE REQUEST APPLIES TO: _____

FINDINGS OF APPROPRIATENESS AND NEED:

PLEASE ADDRESS THE FOLLOWING QUESTIONS IN DETAIL ON A SEPARATE SHEET OF PAPER.

1. What unusual circumstances exist such that a strict enforcement of these requirements and standards would result in an undue hardship to you?
 2. Are there any reasonable alternatives to this project which would allow you to conform to the above regulations (Please list)?
 3. Will granting of the variance result in increased flood heights of hazards (Explain)?
 4. Will the proposed use be adequately flood-proofed (Explain)?
 5. Is this the minimum variance necessary to afford relief (Explain)?
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OTHER SUBMITTALS:

1. Completed application with appropriate fee payable to FCPZ.
2. A Certified list of property owners and their mailing addresses within 150-feet of any property line of the subject property (excluding any surrounding right-of-way) must be submitted with each application

ATTENTION:

A Certified adjoining landowners list must be included upon submission of your application. The form attached to the back of this application must be filled out, signed by a planner, & then taken to the GIS department (3rd floor of Courthouse) to be initiated. The cost is \$75, payable to the GIS office. Your certified list will be available for pick up **one week from the date ordered** and can be picked up in the Plat Room. You may also get a certified adjoining landowners list from a title company if you choose.

Incomplete applications will not be accepted.

3. Detailed plans and specifications for the project.

Applicant signature: _____ Date: _____

ADJACENT OWNERSHIP LIST REQUEST FORM

TO BE FILLED OUT BY THE PLANNING OFFICE, SURVEYOR OR ENGINEER

*	SUBJECT PROPERTY OWNER	
*	SUBJECT PROPERTY ASSESSOR #	
*	SUBJECT PROPERTY LEGAL DESCRIPTION	
*	SEC-TOWNSHIP-RANGE	
*	BUFFER FOOTAGE	
*	CONTACT PERSON	
*	PHONE #	
	MAILING ADDRESS	
*	TODAYS DATE	
	JULIAN DATE	
	PICKUP DATE	
	SUBCODE	
	PLANNER, SURVEYOR OR ENGINEER	

Fields marked with an * are required.

Incomplete forms will not be accepted.

Allow 1 week from receipt by GIS office.